



Janice K. Brewer, Governor

The State of Arizona Veterinary Medical Examining Board  
1400 W. Washington, Ste 240 ♦ Phoenix, AZ 85007  
Phone: 602-364-1738 ♦ Fax: 602-364-1039  
[www.vetboard.az.gov](http://www.vetboard.az.gov)

May 10, 2010

Dear Certified Veterinary Technician Applicant:

The Arizona State (hereafter known as the “**State**”) exam will be administered in December 2010 and February 2011. The Veterinary Technician National Exam (VTNE) will be given 1 more time in 2010 and three times in 2011. Applicants who are taking the VTNE exam **must** register with the American Association of Veterinary State Boards (AAVSB) and pay the registration fee of \$300.00, (credit card payment required to the AAVSB) online at [www.aavsb.org](http://www.aavsb.org). You **must** also apply through the State even if you are only taking the VTNE. The State application fee is \$150.00 whether you are taking the VTNE, the State exam or both, and is payable by **cashier’s check or money order** to the AZVMEB (Arizona Veterinary Medical Examining Board).

**IMPORTANT CHANGES:**

**IF YOU ARE APPLYING TO TAKE THE EXAMINATION(S) BASED ON EXPERIENCE YOU MUST HAVE YOUR APPLICATION SUBMITTED TO OUR OFFICE BY JULY 27, 2010. THE APPLICATION PACKET MUST BE COMPLETE BY SEPTEMBER 28, 2010.**

- The VTNE exam is changing to Computer Based Testing (CBT) and will be administered at Prometric testing centers within specified time windows.
- **After JULY 27, 2010**, applicants who wish to sit for the VTNE **must** be graduates of a Veterinary Technology program, accredited by the AVMA or approved the Board.
- **The State application deadlines for an application to be complete to take the 2010 VTNE and/or State exams is 9/28/2010 for December.**

All State applications for the VTNE and/or State **must be complete** and **received** in the State Board office no later than 65 days before the State exam date (post marked dates are not considered). Office hours are from 8:00 a.m. to 5:00 p.m. Monday through Friday. To assist in preparing for the VTNE exam, a copy of the “*Candidate Information Booklet*” can be obtained at the website: [www.aavsb.org](http://www.aavsb.org). For the State exam, the Arizona Revised Statutes and Arizona Administrative Code can be found at our website: [www.vetboard.az.gov](http://www.vetboard.az.gov).

If you have taken and passed the VTNE within the last five years in another state, please have your score transferred to Arizona through the AAVSB. Please go to [www.aavsb.org](http://www.aavsb.org) to complete the online score transfer application. A converted score of 70 is required to pass both the VTNE as well as the State exam.

Please note effective January 2006 the AAVSB policy is that you may only take the VTNE exam 5 times in 5 years. If you are uncertain of your status, contact the AAVSB at 877-698-8482, before you submit your application to our office. Your monies **WILL NOT be refunded** if you submit your application fee to our office and you are not eligible to sit for the VTNE.

The following study materials, in addition to various other veterinary journals and publications, may be of assistance to you in preparing for the exam and may be purchased at bookstores throughout Arizona or by visiting an online book store:

- Clinical Textbook for Veterinary Technicians: Dennis M. McCurnin/Selma Kaszczuk.
- Review Questions and Answers for Veterinary Technicians: Thomas P. Colville.

Questions on the State exam will include: Regulatory and Law derived from the Arizona Revised Statutes (Amended 2006) and Arizona Administrative Code (Revised November 2008). Questions may also include the following areas: Anatomy, Vocabulary, Physiology, Clinical Pathology, Parasitology, Pathology, Nutrition, Small Animal Medicine, Large Animal Medicine, Exotics, Anesthesiology, Client Relations, Cardiology, Nursing, Pharmacology, Immunology, Surgery, Infectious Diseases, Radiology, Microbiology, Ophthalmology, Toxicology, Diseases and other Hazards indigenous to the Southwest and Laboratory Procedures.

When completing the Statement of Citizenship form, if a name change has occurred, legal documents such as a marriage certificate or divorce papers, need to be sent as well. Driver’s licenses or social security cards are not considered acceptable for this purpose.

Individuals with a disability may request, in writing, a reasonable accommodation. Requests should be sent with the application to allow time to arrange the accommodation.

Should you have any questions or require further assistance, please call our Licensing Administrator at (602) 542-8166.

Sincerely,  
Jenna Jones  
Executive Director

# INSTRUCTIONS FOR VETERINARY TECHNICIAN APPLICATION

Pursuant to Arizona Revised Statutes §32-2242, a person desiring to be certified as a veterinary technician shall make a written application to the Board upon a form furnished by the Board. The applicant shall be of good moral character and at least eighteen years of age and shall furnish one of the following:

- Satisfactory evidence of graduation from a two-year curriculum in veterinary technology, or the equivalent of such graduation as determined by the Board in a college or other institution approved by the Board.

**OR**

**(UNTIL JULY 27, 2010)**

- Satisfactory evidence that the applicant has been employed for at least two years as a veterinary assistant under the supervision of a veterinarian regularly licensed in this state and is recommended to the Board by the employing veterinarian or veterinarians.

Materials Required For Your File:

\_\_\_\_\_ 1. A non-refundable application/examination fee of \$150.00. This fee must be paid by cashier's check or money order to the Arizona State Veterinary Medical Examining Board. Personal checks cannot be accepted.

\_\_\_\_\_ 2. Typewritten letter to the Board or an updated resume giving background information, experience and qualification.

\_\_\_\_\_ 3. Three moral character reference forms from persons not related to you and who have known you a minimum of 3 years. Originals must be submitted. This person cannot be a veterinarian who is submitting a letter of recommendation for you. A copy of the required form is enclosed.

\_\_\_\_\_ 4. If you are applying for certification based upon graduation from an accredited two-year college, an official final transcript must be sent directly to this Board by the school from which you graduated.

**OR**

\_\_\_\_\_ 5. If your application is based on experience, the following is required:

- a. A verification of employment document (form included in this packet) giving satisfactory evidence that you have been employed for at least two years (4,160 hours) as a veterinary assistant under the supervision of a veterinarian regularly licensed in this state. The hours may be completed at more than one premise.
- b. A notarized letter, as required in A.R.S. §32-2242, from each Arizona responsible veterinarian who employed you during the two years the applicant served as a veterinary assistant, verifying the employment, indicating the length of employment and recommending the applicant. The enclosed form, "Veterinary Technician Professional Letter of Recommendation" must be used to complete this requirement.

\_\_\_\_\_ 6. A photograph taken within the last six months. A copy of your driver's license cannot be accepted.

\_\_\_\_\_ 7. "Arizona Statement of Citizenship and Alien Status for State Public Benefits" – Form included in this packet.

\_\_\_\_\_ 7a. Documentation to show proof of citizenship.

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## CERTIFIED VETERINARIAN TECHNICIAN EXAMINATION DATES & DEADLINES

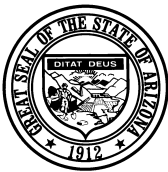
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<u>STATE</u>		<u>VTNE</u>	
<u>Exam Date</u>	<u>Application Deadline</u>	<u>Exam Window</u>	<u>AAVSB Application Deadline</u>
		7/15 – 8/15/2010	6/15/2010
12/02/2010	9/28/2010	11/15-12/15/2010	10/15/2010

**REMEMBER: THE STATE APPLICATION DEADLINE FOR THE VTNE IS THE SAME AS  
THE DEADLINE FOR THE STATE EXAM**

**COMPLETED APPLICATIONS MUST BE RECEIVED AT THE FOLLOWING ADDRESS  
AT LEAST 65 DAYS BEFORE THE NEXT SCHEDULED EXAMINATION.**

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1400 W. Washington, Ste. 240  
Phoenix, AZ 85007



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## APPLICATION FOR VETERINARY TECHNICIAN CERTIFICATION

Applicant is required to enclose with this application, payment of \$150.00 (Application/Examination Fee) payable in U.S. dollars by **money order or cashier's check** to Arizona State Veterinary Medical Examining Board. This fee is not refundable.

### Alternative Format for Submitting Application

An individual with a disability who, as a result of the disability requires this application to be in an alternative format, may contact the Board's Americans with Disability coordinator at (602) 364-1738, or Voice Relay Service (800) 842-4681 or TTY at (800) 367-8939 to make their needs known.

I, \_\_\_\_\_, make application to the Arizona State Veterinary Medical Examining Board for certification as a Veterinary Technician in the State of Arizona by examination pursuant to Article 4, Arizona Revised Statutes §32-2242, et.seq. I understand the filing of this application grants authority to the Board to obtain information from any licensing agency or board in the United States or another country; **and that** I shall make an oath as to the contents of my application and credentials submitted to the Board **and that** I acknowledge that any falsification in my application to the Board is adequate cause by the Board to deny my application; **and that** the Board may report any falsification of information to other licensing agencies and boards.

~ PLEASE CHECK ONE ~

\_\_\_ INITIAL APPLICATION: Choose this one if Exam *has not* been taken *within* the past 5 years.

\_\_\_ REAPPLICATION: Choose this one if Exam was taken *within* the past 5 years: *Date of last application:* \_\_\_\_\_

~ PLEASE CHECK ONE ~

I will be taking the: NATIONAL & STATE: \_\_\_ NATIONAL ONLY: \_\_\_ STATE ONLY: \_\_\_

### Section 1: PERSONAL INFORMATION

Name: \_\_\_\_\_

Mailing Address (Home): \_\_\_\_\_  
Street City County State Zip

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Female \_\_\_\_\_ Male

### Section 2: EMPLOYMENT INFORMATION

Name of Premise where employed: \_\_\_\_\_

Premise Address: \_\_\_\_\_  
Street City State Zip Phone #

Phone Number: (\_\_\_\_) \_\_\_\_\_ Name of Responsible Veterinarian: \_\_\_\_\_

Section 3:

You are submitting this application on the basis of *either* education or employment.  
Check and complete **only the appropriate section on this page.**

☐ **EDUCATION:** \_\_\_\_\_ / \_\_\_\_\_  
Name of School Date of Graduation

Location of School: \_\_\_\_\_  
City State

**OR**

☐ **EMPLOYMENT:** Complete all sections. You may attach additional page(s) if necessary.

***“I am or have been employed as a veterinary technician by the following Arizona licensed veterinarian(s).***

Name of Veterinarian	Premise Name	Beginning and Ending Dates of Employment	Number of Hours Completed

***TOTAL HOURS:*** \_\_\_\_\_

***Note: The total hours must be 4,160 hours whether they were completed as full-time or part-time and they must be met at time of application.***

***\*\*Affidavit on page 3 must be completed\*\****

**AFFIDAVIT**  
**You are required to answer all of the following questions**

Answer the Following Questions:

1. Are you currently licensed/certified/registered as a veterinary technician in other state(s): ..... ☐ Yes ☐ No  
*If yes, list the state(s):* \_\_\_\_\_.
2. Are you currently under investigation or have you been investigated and found in violation of veterinary technician laws or rules in any state(s) in which you have been licensed/certified/registered? ..... ☐ Yes ☐ No  
*If yes, explain below and submit a certified copy of the Board Order with your application.*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Have you ever been convicted of a felony or an undesignated offense? ..... ☐ Yes ☐ No  
*If yes, explain below **and** submit a certified copy of the Record of Conviction and Record of Resolution with your application.*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Have you ever been convicted of cruelty to animals? ..... ☐ Yes ☐ No  
*If yes, explain below **and** submit a certified copy of the Record of Conviction and Record of Resolution with your application.*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Print The Applicant's Full Name:** \_\_\_\_\_ being first duly sworn upon his or her oath deposes and says all of the following: I am the person named in this application. I have read and understand the content of this application. The information contained in the application is true and correct to the best of my ability and the information submitted is without fraud, deceit or misrepresentation. I hereby authorized any past or present employer, past or present business or professional association to release any information to the State of Arizona in connection with my application and state that a photocopy of this authorization shall have the same effect as the original. I also authorized the Arizona State Veterinary Medical Examining Board, or its successor, to release any information submitted by me, upon request, to the public or to any licensing agency, or to any other person, when such request is required or permitted by Arizona Revised Statutes. I acknowledge that any falsification in my application is cause to deny my application. I authorize the Board to tape record any application interview that is conducted of me in regards to this application.

Signature of Applicant: \_\_\_\_\_ Date of Applicant Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_\_

Notary Public Signature: \_\_\_\_\_

My Notary Commission Expires on \_\_\_\_\_

Seal:



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## **MORAL CHARACTER REFERENCE FORM**

The following applicant will be applying to the State of Arizona for veterinary technician certification.

Name of Applicant: \_\_\_\_\_

Please answer the questions below and **return this form to the applicant** so that s/he may submit it with the application. Note: This form is to be completed by persons **not related to the applicant.**

1. Through what context do you know the applicant? \_\_\_\_\_
2. How long have you known the applicant? \_\_\_\_\_ (Must be a minimum of 3 years.)
3. Is the applicant or any member of his/her family related to you in any way? ☐ Yes ☐ No  
**If yes**, please explain: \_\_\_\_\_  
\_\_\_\_\_
4. To your knowledge, has the applicant ever been convicted of a felony, an undesignated offense or cruelty to animals? ..... ☐ Yes ☐ No  
**If yes**, please explain: \_\_\_\_\_  
\_\_\_\_\_
5. To your knowledge, has the applicant ever failed to be trustworthy in relation to his/her responsibilities? ..... ☐ Yes ☐ No  
**If yes**, please explain: \_\_\_\_\_  
\_\_\_\_\_
6. Do you know of any unfavorable incident(s) in the life of the applicant at school, college, business, or otherwise that may have a bearing upon the character or fitness (moral or otherwise) to perform professional duties not covered by questions contained in this questionnaire or disclosed in your answers? ..... ☐ Yes ☐ No  
**If yes**, please explain: \_\_\_\_\_  
\_\_\_\_\_

Print Your Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Your Signature: \_\_\_\_\_ DATE: \_\_\_\_\_



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## VERIFICATION OF EMPLOYMENT VETERINARY TECHNICIAN EXAMINATION

**To Be Completed by Responsible Veterinarian For the Following Person:**

Name of Applicant: \_\_\_\_\_

**For all *Full Time Employment Hours at your premise*,  
complete the following:**

Start Date	Indicate End Date or "Still Employed"	Total Full Time Hours

**For all *Part Time Employment Hours at your premise*,  
complete the following:**

Start Date	Indicate End Date or "Still Employed"	Total Part Time Hours

**Total all Hours:** \_\_\_\_\_

**Total of all hours must equal 4,160 and must be met at time  
of application to qualify applicant to sit for the exam.**

Name of Responsible Veterinarian\*\*: \_\_\_\_\_

Signature of Responsible Veterinarian: \_\_\_\_\_

Date Signed: \_\_\_\_\_

**\*\* Responsible Veterinarian: the doctor whose name appears on the premise license.**



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### ***Veterinary Technician Professional Letter of Recommendation***

*Pursuant to R3-11-606 (A)(3), a notarized letter is required from each Arizona responsible veterinarian who employed the applicant during the 2 years the applicant served as a veterinary assistant, verifying the employment, indicating the length of employment, and recommending the applicant.*

Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Dear Veterinary Medical Examining Board:

I, (Print The Name of the Arizona responsible Veterinarian Submitting This Professional Letter of Recommendation)  
\_\_\_\_\_ being first duly sworn upon his or her oath deposes and  
says all of the following: I am the Arizona License Veterinarian submitting this form. The information contained in this  
Professional Letter of Recommendation is true and correct to the best of my ability and the information submitted is without fraud,  
deceit or misrepresentation.

\_\_\_\_\_  
Signature of Veterinarian

\_\_\_\_\_  
Date of Signature

State of: \_\_\_\_\_

County of: \_\_\_\_\_

Subscribed and sworn to **before me** this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_

Notary Public Signature: \_\_\_\_\_ My commission expires on \_\_\_\_\_

Seal:



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**EXAMPLE:** Veterinary Technician Professional Letter of Recommendation

Date: *(today's date)*

Name of Applicant: *(name of applicant)*

Dear Veterinary Medical Examining Board:

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This letter is to confirm that *(name of applicant)* worked/is working as a veterinary assistant for *(name of clinic)* from *(date)* to *(date)*. *(Name of applicant)* is/was helpful, knowledgeable and caring about our clients. *(Name of applicant)* is/was an excellent employee and I recommend *(name of applicant)* for the CVT exam.

I, (name of Arizona Responsible Veterinarian submitting this Professional Letter of Recommendation)  
\_\_\_\_\_ being first duly sworn upon his or her oath depose and say all of the following: I am the Arizona License Veterinarian submitting this form. The information contained in this Professional Letter of Recommendation is true and correct to the best of my ability and the information submitted is without fraud, deceit or misrepresentation.

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\_\_\_\_\_  
Signature of Veterinarian

\_\_\_\_\_  
Date of Signature

State of: \_\_\_\_(name of state)\_\_\_\_\_

County of: \_\_\_\_(name of county)\_\_\_\_\_

Subscribed and sworn to **before me** this \_\_\_\_(date)\_\_\_\_ day of \_\_\_\_(month)\_\_\_\_, 2009

Notary Public Signature: \_\_\_\_\_ My commission expires on: \_\_\_\_\_

Seal: *(notary seal)*

Pursuant to R3-11-606 (3), each letter from an Arizona licensed veterinarian who employed the applicant during the 4160 minimum hours required to apply by experience, must be dated, signed and **notarized**.

**LETTER(S) MUST HAVE THE FOLLOWING INFORMATION:** *applicant served as a veterinary assistant, verify their employment, indicate the length of employment and recommend the applicant for the exam(s).* Letters that do not include aforementioned information **will not** be accepted.

**Form 1: LONG FORM APPLICANT STATEMENT (revised)**  
**REQUIRING SUBMISSION OF DOCUMENTATION OF STATUS**

**ARIZONA STATEMENT OF CITIZENSHIP  
AND ALIEN STATUS FOR STATE PUBLIC BENEFITS**  
**Professional License and Commercial License**  
**Arizona State Veterinary Medical Examining Board**

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrant, and certain aliens paroled into the United States are eligible to receive state or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 1-501 requires, in general, that a person applying for a license must submit documentation to the licensing agency that satisfactorily demonstrates that the applicant is lawfully present in the United States.

**Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III. Submit this completed form and copy of one or more documents that evidence your citizenship or alien status with your application for license or renewal.**

**SECTION I — APPLICANT INFORMATION**

APPLICANT'S NAME (Print or type) \_\_\_\_\_ DATE \_\_\_\_\_

TYPE OF APPLICATION (check one)      ☐ INITIAL APPLICATION      ☐ RENEWAL

TYPE OF LICENSE \_\_\_\_\_

**SECTION II — CITIZENSHIP OR NATIONAL STATUS DECLARATION**

**Directions:** Attach a legible copy of the front, and the back (if any), of a document from the attached List A or other document that demonstrates U.S. citizenship or nationality.

Name of document provided: \_\_\_\_\_

A. Are you a citizen or national of the United States? (check one)    ☐ Yes      ☐ No

B. If the answer is "Yes," where were you born? List city, state (or equivalent), and country.

City \_\_\_\_\_ State (or equivalent) \_\_\_\_\_

Country or Territory \_\_\_\_\_

If you are a citizen or national of the United States, go to Section IV. If you are not a citizen or national of the United States, please complete Sections III and IV.

### SECTION III — ALIEN STATUS DECLARATION

**Directions:** To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of the front, and the back (if any), of a document from the attached List B or other document that evidences your status. A.R.S. § 1-501. Name of document provided: \_\_\_\_\_.

**“Qualified Alien” Status** (8 U.S.C. §§ 1621(a)(1), -1641(b) and (c))

- ☐ 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA).
- ☐ 2. An alien who is granted asylum under Section 208 of the INA.
- ☐ 3. A refugee admitted to the United States under Section 207 of the INA
- ☐ 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- ☐ 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- ☐ 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- ☐ 7. An alien who is a Cuban and Haitian entrant (as defined in section 501(e) of the Refugee Education Assistance Act of 1980).
- ☐ 8. An alien who is, or whose child or child’s parent is a “battered alien” or an alien subjected to extreme cruelty in the United States.

**Nonimmigrant Status** (8 U.S.C. § 1621(a)(2))

- ☐ 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C. § 1101 et seq.] Nonimmigrants are persons who have temporary status for a specific purpose. See 8 U.S.C. § 1101(a)(15).

**Alien Paroled into the United States For Less Than One Year** (8 U.S.C. § 1621(a)(3))

- ☐ 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA

**Other Persons** (8 U.S.C. § 1621(c)(2)(A) and (C))

- ☐ 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- ☐ 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 et seq.];
- ☐ 13. A foreign national not physically present in the United States.

**Otherwise Lawfully Present** (A.R.S. § 1-501)

- ☐ 14. A person not described in categories 1–13 who is otherwise lawfully present in the United States.  
**PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. § 1621(a).**

### SECTION IV — DECLARATION

**All applicants must complete this section.** I declare under penalty of perjury under the laws of the state of Arizona that the answers I have given are true and correct to the best of my knowledge.

\_\_\_\_\_  
APPLICANT’S SIGNATURE

\_\_\_\_\_  
TODAY’S DATE

## **Attachment to Form 1 Applicant Statement**

### **EVIDENCE OF U.S. CITIZENSHIP, U.S NATIONAL STATUS, OR ALIEN STATUS**

#### **LIST A: U.S. CITIZEN OR U.S. NATIONAL**

Note: In this List, the term "Service" refers to the U.S. Citizenship and Immigration Service, formerly, the U.S. Immigration and Naturalization Service (INS).

[Source: Proposed Rules, Verification of Eligibility for Public Benefits, 8 CFR § 104.23; 63 FR 41662-01 August 4, 1998); and Interim Guidance of Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 ("Interim Guidance"), 62 FR 61344 (Nov. 17, 1997), Attachment 4]

#### **Evidence showing U.S. citizen or U.S. national status includes the following:**

##### **a. Primary Evidence:**

- (1) A birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);
- (2) United States passport;
- (3) Report of birth abroad of a U.S. citizen (FS-240) (issued by the Department of State to U.S. citizens);
- (4) Certificate of Birth (FS-545) (issued by a foreign service post) or Certification of Report of Birth (DS-1350), copies of which are available from the Department of State;
- (5) Form N-561, Certificate of Citizenship;
- (6) Form I-197, United States Citizen Identification Card (issued by the Service until April 7, 1983 to U.S. citizens living near the Canadian or Mexican border who needed it for frequent border crossings) (formerly Form I-179, last issued in February 1974);
- (7) Form I-873 (or prior versions), Northern Marianas Card (issued by the Service to a collectively naturalized U.S. citizen who was born in the Northern Mariana Islands before November 3, 1986);
- (8) Statement provided by a U.S. consular official certifying that the individual is a U.S. citizen (given to an individual born outside the United States who derives citizenship through a parent but does not have an FS-240, FS-545, or DS-1350); or
- (9) Form I-872 (or prior versions), American Indian Card with a classification code "KIC" and a statement on the back identifying the bearer as a U.S. citizen (issued by the Service to U.S. citizen members of the Texas Band of Kickapoos living near the U.S./Mexican border).

[Source: Interim Guidance of Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 ("Interim Guidance"), 62 FR 61344 (Nov. 17, 1997), Attachment 4]

##### **b. Secondary Evidence**

If the applicant cannot present one of the documents listed in (a) above, the following may be relied upon to establish U.S. citizenship or U.S. national status:

- (1) Religious record recorded in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction) within three 3 months after birth showing that the birth occurred in such jurisdiction and the date of birth or the individual's age at the time the record was made;
- (2) Evidence of civil service employment by the U.S. government before June 1, 1976;
- (3) Early school records (preferably from the first school) showing the date of admission to the school, the applicant's date and U.S. place of birth, and the name(s) and place(s) of birth of the applicant's parents(s);
- (4) Census record showing name, U.S. nationality or a U.S. place of birth, and applicant's date of birth or age;

- (5) Adoption finalization papers showing the applicant's name and place of birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction), or, when the adoption is not finalized and the state or other U.S. jurisdiction listed above will not release a birth certificate prior to final adoption, a statement from a State-or jurisdiction-approved adoption agency showing the applicant's name and place of birth in one of such jurisdictions, and stating that the source of the information is an original birth certificate;
- (6) Any other document that establishes a U.S. place of birth or otherwise indicates U.S. nationality (e.g., a contemporaneous hospital record of birth in that hospital in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction));

### **c. Collective Naturalization**

If the applicant cannot present one of the documents listed in (a) or (b) above, the following will establish U.S. citizenship for collectively naturalized individuals:

#### **Puerto Rico:**

- Evidence of birth in Puerto Rico on or after April 11, 1899 and the applicant's statement that he or she was residing in the U.S., a U.S. possession or Puerto Rico on January 13, 1941; or
- Evidence that the applicant was a Puerto Rican citizen and the applicant's statement that he or she was residing in Puerto Rico on March 1, 1917 and that he or she did not take an oath of allegiance to Spain.

#### **U.S. Virgin Islands:**

- Evidence of birth in the U.S. Virgin Islands, and the applicant's statement of residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927;
- The applicant's statement indicating resident in the U.S. Virgin Islands as a Danish citizen on January 17, 1917 and residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927, and that he or she did not make a declaration to maintain Danish citizenship; or
- Evidence of birth in the U.S. Virgin Islands and the applicant's statement indicating residence in the U.S., a U.S. possession or territory or the Canal Zone on June 28, 1932.

#### **Northern Mariana Islands (NMI) (formerly part of the Trust Territory of the Pacific Islands (TTPI)):**

- Evidence of birth in the NMI, TTPI citizenship and residence in the NMI, the U.S., or a U.S. territory or possession on November 3, 1986 (NMI local time) and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time);
- Evidence of TTPI citizenship, continuous residence in the NMI since before November 3, 1981 (NMI local time), voter registration prior to January 1, 1975 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time); or
- Evidence of continuous domicile in the NMI since before January 1, 1974 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time). Note: If a person entered the NMI as a nonimmigrant and lived in the NMI since January 1, 1974, this does not constitute continuous domicile and the individual is not a U.S. citizen

### **d. Derivative Citizenship**

If the applicant cannot present one of the documents listed in a or b above, the following may be used to make a determination of derivative U.S. citizenship:

**Applicant born abroad to two U.S. citizen parents:** Evidence of the U.S. citizenship of the parents and the relationship of the applicant to the parents, and evidence that at least one parent resided in the U.S. or an outlying possession prior to the applicant's birth.

#### **Applicant born abroad to a U.S. citizen parent and a U.S. non-citizen national parent:**

Evidence that one parent is a U.S. citizen and that the other is a U.S. non-citizen national, evidence of the relationship of the applicant to the U.S. citizen parent, and evidence that the U.S. citizen parent resided in the U.S., a U.S. possession, American Samoa or Swain's Island for a period of at least one year prior to the applicant's birth.

**Applicant born out of wedlock abroad to a U.S. citizen mother:** - Evidence of the U.S. citizenship

of the mother, evidence of the relationship to the applicant and, for births on or before December 24, 1952, evidence that the mother resided in the U.S. prior to the applicant's birth or, for births after December 24, 1952, evidence that the mother had resided, prior to the child's birth, in the U.S. or a U.S. possession for a period of one year.

**Applicant born in the Canal Zone or the Republic of Panama:**

- A birth certificate showing birth in the Canal Zone on or after February 26, 1904 and before October 1, 1979 and evidence that one parent was a U.S. citizen at the time of the applicant's birth; or
- A birth certificate showing birth in the Republic of Panama on or after February 26, 1904 and before October 1, 1979 and evidence that at least one parent was a U.S. citizen and employed by the U.S. government or the Panama Railroad Company or its successor in title.

In all other situations in which an applicant claims to have a U.S. citizen parent and an alien parent, or claims to fall within one of the above categories, but is unable to present the listed documentation:

- If the applicant is in the U.S., the applicant should contact the local U.S. Citizenship and Immigration Service office for determination of U.S. citizenship;
- If the applicant is outside the U.S., the applicant should contact the State Department for a U.S. citizenship determination.

**e. Adoption of Foreign-Born Child by U.S. Citizen**

- If the birth certificate shows a foreign place of birth and the applicant cannot be determined to be a naturalized citizen under any of the above criteria, obtain other evidence of U.S. citizenship;
- Because foreign-born adopted children do not automatically acquire U.S. citizenship by virtue of adoption by U.S. citizens, the applicant should contact the local U.S. Citizenship and Immigration Service office for a determination of U.S. citizenship, if the applicant provides no evidence of U.S. citizenship.

**f. U.S. Citizenship By Marriage**

A woman acquired U.S. citizenship through marriage to a U.S. citizen before September 22, 1922. Provide evidence of U.S. citizenship of the husband, and evidence showing the marriage occurred before September 22, 1922.

Note: If the husband was an alien at the time of the marriage, and became naturalized before September 22, 1922, the wife also acquired naturalized citizenship. If the marriage terminated, the wife maintained her U.S. citizenship if she was residing in the U.S. at that time and continued to reside in the U.S.

**LIST B: QUALIFIED ALIENS, NONIMMIGRANTS, AND ALIENS PAROLED INTO U.S. FOR LESS THAN ONE YEAR**

The documents listed below that are registration documents are indicated with an asterisk ("\*").

**a. "Qualified Aliens"**

Evidence of "Qualified Alien" status includes the following:

***Alien Lawfully Admitted for Permanent Residence***

- \*Form I-551 (Alien Registration Receipt Card, commonly known as a "green card"); or
- Unexpired Temporary I-551 stamp in foreign passport or on \*I Form I-94.

***Asylee***

- \* Form I-94 annotated with stamp showing grant of asylum under section 208 of the INA;
- \*Form I-688B (Employment Authorization Card) annotated "274a.12(a)(5)";
- \* Form I-766 (Employment Authorization Document) annotated "A5";
- Grant letter from the Asylum Office of the U.S. Citizenship and Immigration Service; or
- Order of an immigration judge granting asylum.

***Refugee***

- \* Form I-94 annotated with stamp showing admission under § 207 of the INA;

- \* Form I-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or
- \* Form I-766 (Employment Authorization Document) annotated "A3"

***Alien Paroled Into the U.S. for a Least One Year***

- \* Form I-94 with stamp showing admission for at least one year under section 212(d)(5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.)

***Alien Whose Deportation or Removal Was Withheld***

- \* Form I-688B (Employment Authorization Card) annotated "274a.12(a)(10)";
- \* Form I-766 (Employment Authorization Document) annotated "A10"; or
- Order from an immigration judge showing deportation withheld under §243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under § 241(b)(3) of the INA.

***Alien Granted Conditional Entry***

- \* Form I-94 with stamp showing admission under §203(a)(7) of the INA;
- \* Form I-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or
- \* Form I-766 (Employment Authorization Document) annotated "A3."

***Cuban/Haitian Entrant***

- \* Form I-551 (Alien Registration Receipt Card, commonly known as a "green card") with the code CU6, CU7, or CH6;
- Unexpired temporary I-551 stamp in foreign passport or on \* Form I-94 with the code CU6 or CU7; or
- Form I-94 with stamp showing parole as "Cuba/Haitian Entrant" under Section 212(d)(5) of the INA.

***Alien Who Has Been Declared a Battered Alien or Alien Subjected to Extreme Cruelty***

- U.S. Citizenship and Immigration Service petition and supporting documentation

**b. Nonimmigrant**

Evidence of "Nonimmigrant" status includes the following:

- \* Form I-94 with stamp showing authorized admission as nonimmigrant

**c. Alien Paroled into U.S. for Less than One Year**

Evidence includes:

- \* Form I-94 with stamp showing admission for less than one year under section 212(d)(5) of the INA